

BUSINESS RECORDS AFFIDAVIT

STATE OF TEXAS

COUNTY OF Walker

RE: Stephen McCollum, et al v. TDCJ

BEFORE ME, the undersigned authority, personally appeared Nathan Ward, who, being duly sworn by me, deposed as follows:

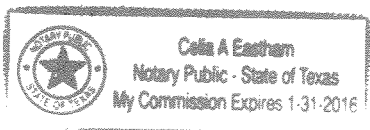
“My name is Nathan Ward. I am over 18 years of age, of sound mind, capable of making this affidavit, and have personal knowledge of the facts herein stated:

“I am employed as a Regional Manager with the Office of the Inspector General (OIG) – Texas Department of Criminal Justice. I am the custodian of the attached records of the OIG. These records are kept by the OIG in the regular course of business, and it was the regular course of business of the OIG for an employee or representative of the OIG, with knowledge of the act, event, condition, or opinion, recorded to make the record or to transmit information thereof to be included in such record; and the record was made at or near the time or reasonably soon thereafter. The attached record is an exact duplicate of the record on file with the Office of the Inspector General in Criminal Case File No. 2011.03110 concerning the death of Offender Robert Webb, TDCJ No. 01569761, as of the date of this affidavit.

Nathan Ward

Nathan Ward
Regional Manager
Office of the Inspector General

SWORN TO AND SUBSCRIBED before me on this the 22nd day of April 2013.



Celia A Eastham

NOTARY PUBLIC in and for
The State of Texas
Printed Name: Celia A Eastham
My commission expires: January 31, 2016

Investigation Updates

<http://10.236.154.44:8180/casemgmt/pages/BlankInvestigationUpdate.jsf>

Summary Investigative Activities
Case Number: 2011.03110

Investigative Activities	
DATE & INITIAL	ACTION/COMMENTS
2011-08-05 00:00:00.0 JDM	Assigned to Region-A
8/6/11	Case Assigned to Investigator : JESSE MABERRY
8.12.11	Received Case J May 231
8-22-11	Case audit. Bprou 312
2-8-12	Case audit. Waiting for final autopsy report. Bprou 312
3-28-12	Received Final Autopsy Report J May 231
5-7-12	Sent for Review J May 231
5/10/12	Disputed - Record for review
5/14/12	L HARDING #195 - reviewed - forwarded to J. Allison for review.
5-14-12 RECEIVED	Reviewed. For Records. N.P. again
MAY 16 2012	KCP
OFFICE OF THE INSPECTOR GENERAL	
5/16/12	KCP Closed

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Criminal Case Parties

http://10.236.154.44:8180/casemgmt/pages/criminalParties.jsf

You are Logged in as JESSE MABERRY

Criminal Case Parties										
Case #:	Incident Date:	Incident Time:	Incident Location: Hodge Unit, J-1 Building		No Suspect					
2011.03110	08/04/2011	03:15:00	Cell # 219							
Select	Last Name	First Name	Party Type	Person Type	DOB	SID #	SSN	TDCJ Number	Sex	Unknown Suspect / Victims
<input type="checkbox"/>	WEBB	ROBERT	Victim	Offender / Parole		03508485		01569761	Male	
<input type="checkbox"/>	SOLLY	PHILLIP	Witness	Employee					Male	
<input type="checkbox"/>	YANCEY	PAUL	Named	Employee					Male	
<input type="checkbox"/>	BURCH	BOBBY	Witness	Contractor / Volt					Female	
<input type="checkbox"/>	WILLIAMS	YVONNE	Witness	Contractor / Volt					Female	
<input type="checkbox"/>	BAXTER	LYNETTE	Witness	Contractor / Volt					Female	
<input type="checkbox"/>	ADAMS	CHARLOTTE	Witness	Contractor / Volt					Female	
<input type="checkbox"/>	CAMPBELL	GERALD	Witness	Contractor / Volt					Male	
<input type="checkbox"/>	SHEHAN	ROY	Witness	Offender / Parole		03618012		01461170	Male	
<input type="checkbox"/>	GEE	MICHAEL	Witness	Offender / Parole		02447951		01689179	Male	

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Statutes

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**Texas Department of Criminal Justice
OFFICE OF THE INSPECTOR GENERAL**

CRIMINAL CASE INFORMATION WORKSHEET

2011.03110
Case Number

Hodge
Unit or Location

Aug 4, 2011
Date of Offense

Aug 5, 2011
Date Case Opening

Victim , Complainant or Witness										
Last Name	First Name	Party Type	Person Type	TDCJ Number	Statutes	Rank	DOB	Race	Sex	SSN
WEBB	ROBERT	Victim	Offender / Parolee	01569761	CCP49.18			White	Male	
SOLLY	PHILLIP	Witness	Employee			Correctional Officer V		White	Male	

Suspects									
Last Name	First Name	Person Type	TDCJ Number	Statutes	Rank	DOB	Race	Sex	SSN

SUMMARY OF OFFENSE

On 08-04-2011 at 3:15 am, security staff found Offender Webb unresponsive in cell # C-219, at the Hodge Unit. Medical staff was contacted and life saving measures were initiated. Webb was pronounced deceased at 3:55 am. Foul play is not suspected and an autopsy was ordered.

Exact Location of Incident : **Hodge Unit, J-1 Building Cell # 219**

Investigator Initials : **JDM** Opened By : **JDM**

OIG Region : **Region-A**

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TEXAS DEPARTMENT OF CRIMINAL JUSTICE

OFFICE OF THE INSPECTOR GENERAL

INCIDENT / INVESTIGATION REPORT

Incident Data	STATUTE 1:	CRIME CLASS:	DESCRIPTION:	ORI#:	CASE #:	
	CCP 49.18	n/a	Death in Custody (Accidental)	236075C	2011.03110	
	STATUTE 2:	CRIME CLASS:	DESCRIPTION:			
	STATUTE 3:	CRIME CLASS:	DESCRIPTION:			
Reportee	DATE OF INCIDENT:	DAY:	TIME:	DATE REPORTED:	TIME REPORTED:	INVESTIGATED BY:
	8/4/2011	Thursday	3:15 a.m.	8/4/2011	4:10 a.m.	Inv. Jesse Maberry
	LOCATION OF INCIDENT			COUNTY OF OFFENSE / CODE:	TYPE OF PREMISES:	
	Hodge Unit 379 FM 2972 West Rusk, Texas 75785			Cherokee / 037	State Prison	
Victim	PERSON REPORTING INCIDENT: NAME: (LAST, First, MI)			DOB:	RACE:	SEX:
	Yancey, Paul				W	Male
	HOME ADDRESS:			PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:
	Hodge Unit 379 FM 2972 West Rusk, Texas 75785			903-683-5781		
Witness	WITNESS #1: NAME: (LAST, First, MI)			DOB:	RACE:	SEX:
	Solly, Phillip				W	Male
	HOME ADDRESS:			PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:
	Hodge Unit 379 FM 2972 West Rusk, Texas 75785			903-683-5781		

ADDENDUM ATTACHED YES

SUMMARY:

On August 4, 2011, at 3:15 a.m., C.O. Phillip Solly found Offender Robert Webb, T.D.C.J.-C.I.D. # 01569761, unresponsive in J-1 Building, Cell # C-219, at the Hodge Unit. Medical staff was contacted and life saving measures was initiated. Webb was pronounced deceased at 3:55 a.m. An autopsy disclosed that Webb's death was considered accidental.

Investigator's Signature

Approving Supervisor's Signature

CC-0240 Draft (05/2011)

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INCIDENT/INVESTIGATION REPORT

CASE #: 2011.03110

ADDITIONAL: VICTIMS, WITNESSES OR NAMED PARTIES

Witness #2	DOB:	RACE:	SEX:	SOCIAL SECURITY #:	DL OR TDCJ #:
Burch, Bobby		W	Female		
HOME ADDRESS:		PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:	
		903-683-5781			
BUSINESS ADDRESS:		EMPLOYER:			
Skyview Unit 379 FM 2972 West Rusk, Texas 75785		U.T.M.B.			
OCCUPATION:					
Registered Nurse					
Witness #3	DOB:	RACE:	SEX:	SOCIAL SECURITY #:	DL OR TDCJ #:
Williams, Yvonne		B	Female		
HOME ADDRESS:		PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:	
		903-683-5781			
BUSINESS ADDRESS:		EMPLOYER:			
Skyview Unit 379 FM 2972 West Rusk, Texas 75785		U.T.M.B.			
OCCUPATION:					
Registered Nurse					
Witness #4	DOB:	RACE:	SEX:	SOCIAL SECURITY #:	DL OR TDCJ #:
Baxter, Lynette		W	Female		
HOME ADDRESS:		PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:	
		903-683-5781			
BUSINESS ADDRESS:		EMPLOYER:			
Skyview Unit 379 FM 2972 West Rusk, Texas 75785		U.T.M.B.			
OCCUPATION:					
Registered Nurse					
Witness #5	DOB:	RACE:	SEX:	SOCIAL SECURITY #:	DL OR TDCJ #:
Adams, Charlotte		W	Female		
HOME ADDRESS:		PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:	
		903-683-5781			
BUSINESS ADDRESS:		EMPLOYER:			
Skyview Unit 379 FM 2972 West Rusk, Texas 75785		U.T.M.B.			
OCCUPATION:					
Registered Nurse					
Witness #6	DOB:	RACE:	SEX:	SOCIAL SECURITY #:	DL OR TDCJ #:
Campbell, Gerald			Male		
HOME ADDRESS:		PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:	
BUSINESS ADDRESS:		EMPLOYER:			
University of Texas Medical Branch Galveston, Texas 77555		U.T.M.B.			
OCCUPATION:					
Pathologist					
Witness #7	DOB:	RACE:	SEX:	SOCIAL SECURITY #:	DL OR TDCJ #:
Shehan, Roy E.		W	Male		TDCJ 01461170
HOME ADDRESS:		PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:	
Hodge Unit 379 FM 2972 West Rusk, Texas 75785					
BUSINESS ADDRESS:		EMPLOYER:			
OCCUPATION:					
Offender					

Investigator's Signature

Approving Supervisor's Signature

CC-0240 Draft(05/2011)

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TEXAS DEPARTMENT OF CRIMINAL JUSTICE

OFFICE OF THE INSPECTOR GENERAL

VICTIM – WITNESS – NAMED PARTY ADDENDUM REPORT

Witness #8	DOB:	RACE:	SEX:	SOCIAL SECURITY #:	DL OR TDCJ #:
Gee, Michael N.		W	Male		TDCJ 01689179
HOME ADDRESS:		PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:	
Hodge Unit 379 FM 2972 West Rusk, Texas 75785					
BUSINESS ADDRESS:		EMPLOYER:			
OCCUPATION:					
Offender					

#	DOB:	RACE:	SEX:	SOCIAL SECURITY #:	DL OR TDCJ #:
HOME ADDRESS:		PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:	
BUSINESS ADDRESS:		EMPLOYER:			
OCCUPATION:					

#	DOB:	RACE:	SEX:	SOCIAL SECURITY #:	DL OR TDCJ #:
HOME ADDRESS:		PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:	
BUSINESS ADDRESS:		EMPLOYER:			
OCCUPATION:					

#	DOB:	RACE:	SEX:	SOCIAL SECURITY #:	DL OR TDCJ #:
HOME ADDRESS:		PRIMARY TELEPHONE #:		SECONDARY TELEPHONE #:	
BUSINESS ADDRESS:		EMPLOYER:			
OCCUPATION:					

Investigator's Signature

Approving Supervisor's Signature

CC-0245 Draft(05/2011)

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INCIDENT/INVESTIGATION REPORT

CASE #: 2011.03110

SUSPECTS

SUSPECT #1: (LAST, First, MI) None						HOME ADDRESS:				PRIMARY TELEPHONE #:			
OCCUPATION:						BUSINESS ADDRESS:				SECONDARY TELEPHONE #:			
RACE:	SEX:	DOB:	HEIGHT:	WEIGHT:	BUILD:	HAIR:	EYES:	COMPLEXION:	SOC SEC #:	DRIVERS LICENSE #:			
TDCJ #:		SID#:		FBI#:		BIRTH PLACE:		ADDITIONAL INFORMATION:					
SUSPECT #2: (LAST, First, MI)						HOME ADDRESS:				PRIMARY TELEPHONE #:			
OCCUPATION:						BUSINESS ADDRESS:				SECONDARY TELEPHONE #:			
RACE:	SEX:	DOB:	HEIGHT:	WEIGHT:	BUILD:	HAIR:	EYES:	COMPLEXION:	SOC SEC #:	DRIVERS LICENSE #:			
TDCJ #:		SID#:		FBI#:		BIRTH PLACE:		ADDITIONAL INFORMATION:					
SUSPECT #3: (LAST, First, MI)						HOME ADDRESS:				PRIMARY TELEPHONE #:			
OCCUPATION:						BUSINESS ADDRESS:				SECONDARY TELEPHONE #:			
RACE:	SEX:	DOB:	HEIGHT:	WEIGHT:	BUILD:	HAIR:	EYES:	COMPLEXION:	SOC SEC #:	DRIVERS LICENSE #:			
TDCJ #:		SID#:		FBI#:		BIRTH PLACE:		ADDITIONAL INFORMATION:					
SUSPECT #4: (LAST, First, MI)						HOME ADDRESS:				PRIMARY TELEPHONE #:			
OCCUPATION:						BUSINESS ADDRESS:				SECONDARY TELEPHONE #:			
RACE:	SEX:	DOB:	HEIGHT:	WEIGHT:	BUILD:	HAIR:	EYES:	COMPLEXION:	SOC SEC #:	DRIVERS LICENSE #:			
TDCJ #:		SID#:		FBI#:		BIRTH PLACE:		ADDITIONAL INFORMATION:					
SUSPECT #5: (LAST, First, MI)						HOME ADDRESS:				PRIMARY TELEPHONE #:			
OCCUPATION:						BUSINESS ADDRESS:				SECONDARY TELEPHONE #:			
RACE:	SEX:	DOB:	HEIGHT:	WEIGHT:	BUILD:	HAIR:	EYES:	COMPLEXION:	SOC SEC #:	DRIVERS LICENSE #:			
TDCJ #:		SID#:		FBI#:		BIRTH PLACE:		ADDITIONAL INFORMATION:					

Investigator's Signature

Approving Supervisor's Signature

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INCIDENT/INVESTIGATION REPORT

CASE #: 2011.03110

INTRODUCTION:

I, Investigator Jesse Maberry, am currently assigned as a Criminal Investigator with the Texas Department of Criminal Justice - Office of Inspector General, Region A, where my areas of responsibility include Cherokee County, where this incident occurred.

Regional Supervisor Bill Jones, Region A, and Investigator John Riggle, Region A, assisted in this investigation.

REPORTER'S STATEMENT:

Lieutenant (Lt.) Paul Yancey reported during a telephone conversation that, on August 4, 2011, at 3:15 a.m., Correctional Officer (C.O.) Phillip Solly found Offender Robert Webb unresponsive in J-1 Building, Cell # C-219, at the Hodge Unit. Yancey reported that medical staff was contacted and life saving measures was initiated. Yancey further reported that Webb was pronounced deceased at 3:55 a.m.

CRIME SCENE DESCRIPTION:

The Hodge Unit is located at 379 FM 2972 W. Rusk, Texas 75785. Four buildings for the housing of offenders are located on the west side of the unit. The J-1 Building is located to the east of the other three buildings. The J-1 Building consists of three wings, A-Wing, B-Wing and C-Wing, with two rows of cells per wing. C-Wing runs to the north from the core of the building. Cell # C-219, is located on the second floor of C-Wing. The cell is designed for two-person occupancy and Offender Robert Webb and Offender Roy Shehan, T.D.C.J.-C.I.D. # 01461170, were assigned to the cell on August 4, 2011.

INVESTIGATOR'S NARRATIVE:

On August 4, 2011, at 3:15 a.m., C.O. Phillip Solly found Offender Robert Webb unresponsive in his assigned cell, which was J-1 Building, Cell # C-219, at the Hodge Unit. Medical staff was contacted and security staff initiated life saving measures.

At approximately 3:30 a.m., Registered Nurse (R.N.) Bobby Burch, R.N. Yvonne Williams and R.N. Lynette Baxter arrived and took over medical treatment of Webb. Webb was transported by gurney to the Skyview Unit Medical Department. R.N. Charlotte Adams arrived as Webb was being transported to the Skyview Unit Medical Department and assisted in his treatment.

Emergency Medical Services took over life saving measures when Webb reached the Skyview Unit Medical Department. An electronic automated defibrillator was attached to Webb that disclosed a reading of asystole. Emergency Medical Services staff pronounced Webb deceased at 3:55 a.m.

At 4:08 a.m., Lt. Paul Yancey at the Hodge Unit contacted me and advised me that Offender Webb passed away. I arrived at the Hodge Unit and started my investigation by examining Offender Webb's body. I observed one small abrasion to Webb's left elbow. I observed no other evidence of injury or trauma to the

Investigator's Signature
 Approving Supervisor's Signature
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INCIDENT/INVESTIGATION REPORT

CASE #: 2011.03110

body. I took digital photographs of the body. I then completed an Investigator's Report of Custodial Death. I conducted interviews with security staff and medical staff involved in the incident.

At 5:05 a.m., Tony Johnson, Cherokee County Justice of the Peace Precinct 2, arrived at the Hodge Unit. Johnson pronounced Webb deceased and conducted an inquest at 5:05 a.m. Johnson ordered an autopsy of the body.

Unit records disclosed that temperature checks were performed on the dayrooms of the wings at the Hodge Unit on August 4, 2011. The records disclosed that the temperature in the C-Wing Dayroom was 97.5 degrees at 4:00 p.m. The records further disclosed that the temperature in the C-Wing Dayroom was 94.8 degrees at 7:45 p.m.

Medical Records disclosed that medical staff was called to the J-1 Building, Cell # C-219, concerning an unresponsive patient at 3:30 a.m. on August 4, 2011. The patient was on a gurney and security staff had initiated cardio-pulmonary resuscitation (C.P.R.) upon medical staff's arrival. C.P.R. was continued until Emergency Medical Services (E.M.S.) arrived. E.M.S. took over life saving measures. The unresponsive patient's skin was warm and moist. The patient's pulse and respirations were absent. The patient was intubated and I.V. therapy was attempted but was unsuccessful. An electronic automated defibrillator was applied to the patient that disclosed a reading of asystole. E.M.S. staff pronounced the patient deceased at 3:55 a.m.

Medical Records disclosed that Offender Webb was prescribed chlorpromazine, 200 milligram tablet, one tablet a day in the evening for thirty days; citalopram, 40 milligram tablet, one tablet a day in the evening for thirty days; and omeprazole, 20 milligram capsule, one capsule twice a day for thirty days.

Provisional Autopsy Report # AU-11-00165, disclosed a provisional autopsy diagnosis of the cause of death is most likely cardiac arrhythmia. Though toxicologic and neuropathologic examinations are pending, the pathologist's opinion is that the manner of death is natural, and that this can be characterized as a sudden cardiac death.

Final Autopsy Report # AU-11-00165, disclosed that, based on the history to exposure to high ambient temperature and advanced autolysis, environmental hyperthermia is likely a major factor contributing to death in this case. However, the measured toxic level of citalopram cannot be ruled out as a significant (and possibly major) factor. In either case, the manner of death must be considered accidental, as no evidence of suicidal intent has been presented.

Certificate of Death, State File Number 142-11-099594, for Offender Webb from the Department of Health Services Vital Statistics Unit and signed by Justice of the Peace Tony Johnson listed the manner of death as pending investigation.

VICTIM(S):

1. **Robert Webb, T.D.C.J.-C.I.D. # 01569761, Offender, Deceased:** Offender Robert Webb was a fifty year old white male who was serving concurrently a nine year sentence for aggravated robbery

Investigator's Signature

Approving Supervisor's Signature

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INCIDENT/INVESTIGATION REPORT

CASE #: 2011.03110

out of Harris County and an eight year sentence for aggravated assault with a deadly weapon out of Chambers County. Webb was received by T.D.C.J.-C.I.D. on May 20, 2009. Webb was classified as intellectually impaired. Webb was housed on the Hodge Unit at the time of his death.

SUSPECT(S):

1. None

WITNESSES:

1. **Phillip Solly, Correctional Officer, Hodge Unit:** An interview was conducted with C.O. Phillip Solly who stated that, on August 8, 2011 at 2:30 a.m., he was conducting a count on C-wing. Solly stated while conducting count he observed Offender Webb talking with his cellmate Roy Shehan. Solly stated that he began an egress on C-wing for the morning meal at 3:15 a.m. Solly stated that when he approached Cell # C-219, he observed Webb lying on a mattress on the floor by the cell door. Solly stated he called Webb by name several times, with no response. Solly stated He observed urine around Webb's body and on his clothing. Solly stated he exited the cell and called for a supervisor and medical. Solly stated that he checked for a pulse on Webb's neck and no pulse was found. Solly stated he rolled Webb off the mattress onto his back and began C.P.R. Solly stated that medical staff arrived on scene and requested that Webb be taken down stairs and placed on a gurney for transport. Solly stated that he along with other security staff carried Webb from his cell to the I-Row Dayroom where they placed him on the gurney. Solly stated he climbed on the gurney and continued C.P.R. Solly stated that other security staff pushed the gurney to the Skyview Unit Infirmary. Solly stated upon their arrival, an ambulance and two paramedics were waiting to assist. Solly stated that the paramedics relieved him. Solly provided a voluntary statement.
2. **Bobby Burch, Registered Nurse, Skyview Unit:** An interview was conducted with Registered Nurse Bobby Burch who stated that Offender Webb was found unresponsive in J-1 Building, Cell # C-219. Burch stated that she arrived on scene with security staff and she evaluated Webb's condition. Burch stated that Webb was warm and moist, but was unable to palpate a pulse. Burch stated that C.P.R. continued while Webb was transported to the Skyview Unit Infirmary. Burch stated that E.M.S. was on scene upon their arrival with Webb at the Skyview Unit Infirmary. Burch stated that an A.E.D. was applied to Webb and C.P.R. was continued as E.M.S. assumed care of Webb. Burch provided a voluntary statement.
3. **Yvonne Williams, Registered Nurse, Skyview Unit:** An interview was conducted with Registered Nurse Yvonne Williams who stated that at 3:30 a.m., she arrived on J-1 Building and observed security staff performing C.P.R. on Offender Webb. Williams stated that she assisted in performing C.P.R. all the way to the Skyview Unit Infirmary where E.M.S. was waiting. Williams stated that she attempted to start an I.V., but was unsuccessful. Williams stated that medical staff continued C.P.R. William stated that E.M.S. applied an A.E.D. Williams stated that E.M.S. pronounced Webb deceased at 3:55 a.m. Williams provided a voluntary statement.

Investigator's Signature

Approving Supervisor's Signature

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INCIDENT/INVESTIGATION REPORT

CASE #: 2011.03110

4. **Lynette Baxter, Registered Nurse, Skyview Unit:** An interview was conducted with Registered Nurse Lynette Baxter who stated she was called to J-1 Building for an emergency at 3:30 a.m. Baxter stated that, upon her arrival, security staff and medical staff were escorting Webb toward the Skyview Unit Infirmary while performing C.P.R. Baxter stated that she assisted in performing C.P.R. Baxter stated that, upon their arrival at the Skyview Unit Infirmary, E.M.S. was present and applied the A.E.D. to Webb. Baxter stated that E.M.S. intubated Webb and continued C.P.R. Baxter stated that E.M.S. pronounced Webb deceased at 3:55 a.m. Baxter provided a voluntary statement.
5. **Charlotte Adams, Registered Nurse, Skyview Unit:** An interview was conducted with Registered Nurse Charlotte Adams who stated that a radio call was received to respond to J-1 Building due to an offender who was unconscious. Adams stated that she met security staff and Nurse Williams pushing Webb on a gurney. Adams stated that C.P.R. was being performed on Webb. Adams stated that they arrived at the E.M.S. vehicle where E.M.S. took over C.P.R. with the assistance of medical staff. Adams stated that intubation was attempted, as well as I.V. therapy. Adams stated that an A.E.D. was applied to Webb. Adams stated the monitor displayed Webb to be without a pulse. Adams stated that no respiration or pulse was present. Adams stated that E.M.S. pronounced Webb deceased at 3:55 a.m. Adams provided a voluntary statement.
6. **Gerald Campbell, Pathologist, U.T.M.B. Autopsy Services:** Doctor Gerald Campbell performed the autopsy on the body of Offender Webb on August 9, 2011.
7. **Roy Shehan, T.D.C.J.-C.I.D. # 01461170, Offender, Hodge Unit:** An interview was conducted with Offender Roy Shehan who stated that he was the cellmate of Offender Webb and that he and Webb have been cellmates for one year. Shehan stated that on August 3, 2011 at 8:00 p.m., he and Webb were talking and continued to talk until approximately 2:00 a.m. Shehan stated that Webb said he was tired and asked Shehan to put his mattress on the floor. Shehan stated that, at approximately 3:15 a.m., security staff opened the cell doors on C-Wing for the morning meal. Shehan stated that Webb was still lying on his mattress when the officer approached their cell. Shehan stated that the officer noticed Webb's color was not right and started C.P.R. Shehan stated that they had been allowed to get cold water during the day and the officers were walking the runs. Shehan stated that security staff had done everything they could to help Webb. Shehan provided a voluntary statement.
8. **Michael Gee, T.D.C.J.-C.I.D. # 01689179, Offender, Hodge Unit:** An interview was conducted with Offender Michael Gee who stated that he was in the C-Wing Dayroom during the evening on August 3, 2011. Gee stated that he saw Offender Webb take five Thorazine tablets. Gee stated that Webb tried to buy Thorazine tablets from him but he did not sell him any. Gee could not provide any further information and would not provide a written statement.

EVIDENCE:

The evidence consists of one compact disc containing digital photographs of the body of Offender Webb and Cell # C-219, that was assigned to Webb. I packaged the compact disc as evidence and turned it over to

Sam McG...
Investigator's Signature
Leigh...
Approving Supervisor's Signature
CC-0240 Draft(05/2011)

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INCIDENT/INVESTIGATION REPORT

CASE #: 2011.03110

Hodge Unit O.I.G. Evidence Custodian Investigator John Riggle. Riggle placed the evidence in the Hodge Unit O.I.G. Evidence Locker. I entered the evidence into the Case Management Evidence Log. The system assigned the evidence Tag # 2011.03110.0001.

DISPOSITION:

Based upon the fact that this investigation disclosed the death of Offender Robert Webb was accidental in nature and was not caused by any illegal act, this case is being **Administratively Closed**.

ATTACHMENTS:

1. Investigators Report of Custodial Death.
2. Order for Autopsy.
3. Inquest Report.
4. Transport Authorization for Offender Remains.
5. Certificate of Death.
6. Provisional Autopsy Report # AU-11-00165.
7. Final Autopsy Report # AU-11-00165.
8. Photographs of Offender Webb's assigned cell.
9. Photographs of Offender Webb's body.
10. Temperature Check Log.
11. Medical Records of Offender Webb.
12. Voluntary Written Statement provided by C.O. Solly.
13. Voluntary Written Statement provided by R.N. Burch.
14. Voluntary Written Statement provided by R.N. Williams.
15. Voluntary Written Statement provided by R.N. Baxter.
16. Voluntary Written Statement provided by R.N. Adams.
17. Voluntary Written Statement provided by Offender Shehan.
18. Custodial Death Report Information worksheet.
19. Copy of Offender Webb's travel card.
20. Evidence Details.
21. Incident Report # I-10978-08-11.

Investigator's Signature

Approving Supervisor's Signature

CC-0240 Draft(05/2011)

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**Texas Department of Criminal Justice
OFFICE OF THE INSPECTOR GENERAL**

SUPPLEMENT CRIMINAL CASE REPORT

OFFENSE Death in Custody CCP 49.18	CASE #: 2011.03110
LOCATION: Hodge Unit, Cherokee County	DATE OF OFFENSE: 08-04-2011
VICTIM: Webb, Robert TDCJ-CID # 1569761	DATE OF SUPPLEMENT REPORT: 08-09-2011

On August 4, 2011, at approximately 3:15 a.m. security staff discovered Offender Webb in an unresponsive condition in J-1 Building, C-Wing, Cell 219. Life saving measures was initiated and Webb was transported, by gurney, to the Skyview Unit Infirmary, where he was pronounced dead.

On August 4, 2011, at 6:45 a.m. I interviewed and took a written statement from Offender Roy E. Shehan TDCJ-CID # 1461170. Shehan was the cellmate of Offender Webb at the time of the incident. Shehan stated that he and Webb had been cellmates for one year. He stated that they were up talking from 8:00 p.m. until about 2:30 a.m. Shehan stated that Webb said he was feeling tired and asked Shehan to put his bed (Mattress), on the floor. Shehan stated that at 3:15 a.m. security opened the cell doors for breakfast, and Webb was still lying on the mattress, on his stomach, and did not respond. Shehan stated that the officer attempted to wake Webb, but Webb's color was not right so CPR was started. Shehan stated that during the day they had asked for cold water and had been allowed to get cold water, and that the officers were walking the runs.

Shehan stated that he and Webb did not go to recreation and that Webb had not had any problems with other offenders. Shehan stated that he and Webb would go to the pill window together and that Webb had been getting his medication. Shehan stated that Webb had never mentioned having any medical problems and had not said anything about not feeling well. Shehan stated that security staff had done everything they could to help Webb.

I examined the hands of Offender Shehan and found no signs of injury or any other indications about his person that would indicate that he had been involved in a fight. Shehan told me that he and Webb had a good relationship and that they had never had any problems with each other. Shehan told me that he and Webb both had fans. Shehan told me the Webb did not have an in cell exercise regiment.

INVESTIGATING OFFICER(S)	
(1) <i>Ben Jones</i>	ID# 322 DATE 8-9-11
(2) <i>B. Jones</i>	ID# 322 DATE 8-9-11
APPROVING SUPERVISOR	IS FURTHER INVESTIGATIVE ACTION REQUIRED? YES NO
CC-0255 (07/2005)	<div style="border: 2px solid black; padding: 5px;"> Photocopy of OIG Case to Litigation Support Date sent: 4/19/13 Sent by: ce Office of the Inspector General-Records Release Section UNAUTHORIZED COPYING OR VIEWING PROHIBITED </div>



**Texas Department of Criminal Justice
OFFICE OF THE INSPECTOR GENERAL**

SUPPLEMENT CRIMINAL CASE REPORT

OFFENSE Death in Custody	CASE #:
LOCATION: Hodge Unit, C-219 Cell	DATE OF OFFENSE: August 4, 2011
VICTIM: Offender Robert Webb, # 1569761	DATE OF SUPPLEMENT REPORT: August 5, 2011

On August 4, 2011, during an OIG interview, Offender Michael Gee, # 1689179, assigned to C-204 Cell of the Hodge Unit, stated that on the evening of August 3, 2011, he was in the dayroom with Offender Webb and he saw Webb take five Thorazine tablets. He stated that Webb tried to buy Thorazine tablets from him but he did not sell him any pills. Offender Gee could not provide any further information and declined to provide a written statement. Offender Gee is admitted to the Developmental Disabilities Program at the Hodge Unit.

INVESTIGATING OFFICER(S)		<i>John T. Rigg</i> Criminal Investigator Badge # 189	<i>8-5-11</i>	IS FURTHER INVESTIGATIVE ACTION REQUIRED? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
(1)	<i>[Signature]</i>	ID#	DATE	
(2)	<i>[Signature]</i>	ID#	DATE	
APPROVING SUPERVISOR				
CC-0255 (07/2005)		<div style="border: 2px solid black; padding: 5px;"> <i>175</i> Photocopy of OIG Case to: <i>5/14/12</i> Date sent: 4/19/13 Sent by: ce Office of the Inspector General-Records Release Section UNAUTHORIZED COPYING OR VIEWING PROHIBITED </div>		



Texas Department of Criminal Justice
OFFICE OF THE INSPECTOR GENERAL

INVESTIGATOR'S REPORT
OF CUSTODIAL DEATH

OIG TRANSITORY #: (if necessary)			
CASE #:	EAC #:	OFFICIAL DATE & TIME OF DEATH:	AUTOPSY ORDERED?
	I-	08-04-2011 505 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
DECEDENT NAME: (LAST, First, MI)		RACE:	SEX:
Webb, Robert Allen		W	M
IDENTIFICATION #:	UNIT OF ASSIGNMENT:	AGE:	DOR:
1569761	Hodge	50	
PLACE OF DEATH:	CITY:	DATE & TIME FOUND:	
Hodge Unit	Rusk	08-04-2011 3:15 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	
J.P. / M.E. NOTIFIED: (Name)	PRECINCT #	COUNTY:	ZIP CODE
Tony Johnson	2	Cherokee	75785
PLACE OF INQUEST:		DATE & TIME J.P. / M.E. NOTIFIED	PHOTOGRAPHS?
Skyview Medical in Firmway		08-04-2011 4:15 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
DATE & TIME OF INQUEST:			
08-04-2011 505 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM			

★ LOCATION, POSITION and SURROUNDINGS of BODY ★

J-1 C-219 cell Subject Saturs offender lying on the floor unresponsive on top of mattress.

★ SUMMARY of HOW DEATH OCCURRED ★

On 08-04-2011 at 3:15 AM, Correctional officer found lying unresponsive on mattress which was on cell floor.

TRANSPORTING FUNERAL HOME:	RECEIVING FUNERAL HOME:
Carnes Funeral Home	Carnes Funeral Home
INVESTIGATOR SIGNATURE:	TELEPHONE #:
<i>Jerome M. [Signature]</i>	(907) 683 5781 #1667

Law Enforcement Agency:

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

OFFICE OF THE INSPECTOR GENERAL

P.O. Box 4093, Huntsville, TX 77342-4003

(936) 437-6735

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Page 1 of 2

INVESTIGATOR'S REPORT OF CUSTODIAL DEATH

(Continued)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE - OFFICE OF THE INSPECTOR GENERAL

CASE #:	DECEDENT NAME: (LAST, First MI) <i>Webb, Robert Allen</i>	IDENTIFICATION #: <i>1569761</i>
---------	--	-------------------------------------

★ CLOTHING WORN BY DECEDENT ★

<input type="checkbox"/> None	<input type="checkbox"/> Pants	<input type="checkbox"/> Shoes/Boots	<input type="checkbox"/> Jacket
<input type="checkbox"/> Belt	<input type="checkbox"/> Gown/Blouse	<input type="checkbox"/> Dress	<input checked="" type="checkbox"/> Other (list details below)

Under wear (Boxers)

★ PROPERTY SENT WITH DECEDENT ★

None

★ MEDICAL HISTORY ★

Was death attended?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Previous history of illness?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
History of suicide?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	HIV?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
HOSPITAL NAME: <i>N/A</i>	ADDRESS:	TELEPHONE: () -	
PHYSICIAN CONTACTED: (Name) <i>N/A</i>	ADDRESS:	TELEPHONE: () -	

DIAGNOSIS: *Pending Autopsy*

★ NEXT OF KIN INFORMATION ★

NEXT OF KIN: <i>Edna Webb</i>	ADDRESS: <i>399 Stone Hing Houston, Tx</i>	TELEPHONE: <i>(713) 451-9367</i>
NEXT OF KIN NOTIFIED BY: (Name)	TELEPHONE: () -	DATE & TIME NOTIFIED: <input type="checkbox"/> AM <input type="checkbox"/> PM

★ IDENTIFICATION ★

HOW: <input checked="" type="checkbox"/> Offender Records	<input type="checkbox"/> Fingerprints
<input type="checkbox"/> Viewed at Hospital/Scene	<input type="checkbox"/> Other

★ DOCUMENTATION ★

<input checked="" type="checkbox"/> Order for Autopsy	<input checked="" type="checkbox"/> Clinic Notes (last 72 hrs)
<input type="checkbox"/> ER Report (if available)	<input checked="" type="checkbox"/> Copy of Travel Card

Verification Made By:

Relationship to Decedent: (1) Case File (2) J.P. (3) To Accompany Body

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CC-0265 (07/2005)

Texas Department of Criminal Justice
AUTOPSY ORDER

In accordance with Section 501.055 of the Government Code, the following Order shall serve as authorization to perform an autopsy on the body of the deceased offender identified below.

Offender Name <u>Robert Allen Webb</u>		TDCJ # _____
Date of Birth <u>2/11/1961</u>	Race <u>W</u>	Sex <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
Offender Pronounced Dead at <u>5:05 A.M.</u> on <u>8/4/2011</u>		
<small>(print time, include am or pm)</small>		<small>(print day, month, and year)</small>
Location of Death _____	Unit <u>Hodge Unit</u>	Other _____
	<small>(print unit name)</small>	<small>(print hospital or facility name)</small>

Acting in my capacity as an authorized official of the Texas Department of Criminal Justice, I hereby order and decree that an autopsy be performed on the body of the above described offender. Said autopsy should be performed to determine the cause of death of the offender who died of natural causes while attended by a physician or registered nurse.

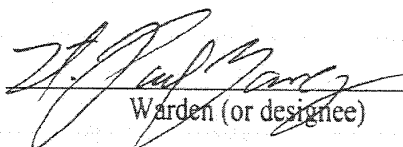
Said autopsy should include a determination of the cause of death and toxicological examination of the urine, blood, and other bodily matter as deemed necessary to determine types and amounts of alcohol or drugs, if any, are present in the body. I further order that said autopsy be performed by the UTMB Autopsy Service Physicians and/or associates.

It is understood that due care shall be taken to avoid unnecessary disfigurement of the body.

Further, shall be transported to Galveston UTMB (location of autopsy) by a representative or associate of Carnes Funeral Home, located in Texas City Texas. Upon completion of the said autopsy, the body should be relinquished to a representative of the delivering funeral home who can be reached at 1-888-822-7637 (phone number), for transport.

Please forward a copy of preliminary findings and reports to:

TDCJ Death Records Technician, Health Services Division
3009 Hwy. 30 West, Room 162
Huntsville, Texas 77340
(936) 437-3631 (phone) or (936) 437-3638 (fax)

 LT. PAUL YANCEY
Warden (or designee)

County _____

City _____, Texas _____

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2.1

Tony Johnson
Justice of the Peace Pct. #2
Inquest Report

Name: Robert Allen Webb

Address: 379 FM 2972 W Rusk, Texas

Date of Birth: [REDACTED] S.S. # [REDACTED]

Date of Inquest: 8/4/2011 Time of Inquest: 5:05 Am

Place of Inquest: Hodge Unit TDC

Date of Death: 8-4-2011 Time of Death:

Place of Death: 379 FM 2972 W Rusk, Texas

Description of Deceased: Dressed in Shorts

Cause of Death: Autopsy ordered

Witnesses: Lt Paul Yancey office 903-683-5781 #1667

Law Enforcement: Inv Jesse Maberry TDCJ-OIG

Funeral Home: Carnes Funeral Home Autopsy Ordered?:

Medical History:

Medications:

Ch

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AD-03.29 (rev. 7)
Attachment A
Page 13 of 21

**Texas Department of Criminal Justice
TRANSPORT AUTHORIZATION FOR OFFENDER REMAINS**

The undersigned authorizes and directs the coordinating funeral home
and/or its said agents or staff to make the removal of the said remains of
Webb, Robert T, A. from SU5 DSC,
(Print Offender Name) (Print Unit/Location)
who died on 08-04-2011, and to hold until further notification
(Date of Death)
from the Warden of the unit with regards to the approval for an autopsy.

NOTE: If an offender death is determined to be from natural cause by a certified medical physician, the offender's family will be provided the opportunity to object to an autopsy.

Instructions: If death occurs on the unit the Warden shall sign this form authorizing the transport of the remains. If death occurs off the unit the Warden shall sign the form and shall the deliver the form by the most expedient means to the appropriate medical staff at the location of the death.

J. Paul Yancey
Signature of Warden/Designee

LT. PAUL YANCEY
Printed Name

Yvonne Williams RN
Medical Physician's/Registered Nurse's Signature

Yvonne Williams RN
Printed Name

Address of Physician/Registered Nurse:

B79 FM 2972 W
Rusk, Tx 75785

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REPLICATION OF VITAL RECORD

**DEPARTMENT OF STATE HEALTH SERVICES
VITAL STATISTICS UNIT**

TEXAS DEPARTMENT OF STATE HEALTH SERVICES - VITAL STATISTICS
AUG 15 2011
STATE OF TEXAS **CERTIFICATE OF DEATH** **STATE FILE NUMBER 142-11-099594**

1. LEGAL NAME OF DECEASED (Include AKA's, if any) (First, Middle, Last) **ROBERT ALLEN WEBB** 2. DATE OF DEATH (Actual or Presumed) **08/04/2011**

3. SEX **MALE** 4. DATE OF BIRTH **05/01/1950** 5. AGE - Last Birthday (Years) **60** 6. BIRTHPLACE (City & State or Foreign Country) **DALLAS, TX**

7. SOCIAL SECURITY NUMBER **[REDACTED]** 8. MARITAL STATUS AT TIME OF DEATH ☐ Married ☒ Widowed ☐ Divorced ☐ Never Married ☐ Unknown 9. SURVIVING SPOUSE'S NAME (If wife, give name prior to first marriage)

10a. RESIDENCE STREET ADDRESS **378 FM 2972** 10b. APT. NO. **RUSK** 10c. CITY OR TOWN **RUSK**

10d. COUNTY **CHEROKEE** 10e. STATE **TEXAS** 10f. ZIP CODE **75785** 10g. INSIDE CITY LIMITS? ☒ Yes ☐ No

11. FATHER'S NAME **SIDNEY S WEBB** 12. MOTHER'S NAME PRIOR TO FIRST MARRIAGE **ENDA TAYLOR**

13. PLACE OF DEATH (CHECK ONLY ONE)
☐ If death occurred in a hospital: ☐ Inpatient ☐ Outpatient ☐ DOA
☐ If death occurred somewhere other than a hospital: ☐ Hospice Facility ☐ Nursing Home ☐ Decedent's Home ☒ Other (Specify) **TDCJ HODGE UNIT**

14. CITY/TOWN, ZIP (If outside city limits, give precinct no.) **CHEROKEE, TEXAS 75785** 15. FACILITY NAME (If not institution, give street address) **279 FM 2972**

16. INFORMANT'S NAME & RELATIONSHIP TO DECEASED **TEXAS DEPARTMENT OF CRIMINAL JUSTICE PRISON - LISA A D'CUNHA** 17. MAILING ADDRESS OF INFORMANT (Street and Number, City, State, Zip Code) **262 FM 3478 SUITE B, HUNTSVILLE, TX 77320**

18. METHOD OF DISPOSITION ☒ Burial ☐ Cremation ☐ Donation ☐ Entombment ☐ Removal from state ☐ Other (Specify) **PHILLIP E BUSH, BY ELECTRONIC SIGNATURE - 113653**

19. SIGNATURE AND LICENSE NUMBER OF FUNERAL DIRECTOR OR PERSON ACTING AS SUCH **PHILLIP E BUSH, BY ELECTRONIC SIGNATURE - 113653** 20. SIGNATURE AND LICENSE NUMBER OF FUNERAL DIRECTOR OR PERSON ACTING AS SUCH

21. PLACE OF DISPOSITION (Name of cemetery, crematory, other place) **CAPT JOE BYRD CEMETERY** 22. LOCATION (City/Town, and State) **HUNTSVILLE, TX**

23. NAME OF FUNERAL FACILITY **CARNES - TDCJ** 24. COMPLETE ADDRESS OF FUNERAL FACILITY (Street and Number, City, State, Zip Code) **3100 GULF FREEWAY, TEXAS CITY, TX 77591**

25. CERTIFIER (Check only one)
☐ Certifying physician - In the best of my knowledge, death occurred due to the cause(s) and manner stated.
☒ Medical Examiner/Coroner of the Peace - On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date and place, and due to the cause(s) and manner stated.

26. SIGNATURE OF CERTIFIER **TONY JOHNSON, BY ELECTRONIC SIGNATURE** 27. DATE CERTIFIED (MM/DD/YYYY) **08/04/2011** 28. LICENSE NUMBER **05:05 AM**

29. PRINTED NAME, ADDRESS OF CERTIFIER (Street and Number, City, State, Zip Code) **TONY JOHNSON 123 W. SAN ANTONIO, ALTO, TX 75925** 30. TITLE OF CERTIFIER **JP**

31. PART 1: ENTER THE CHAIN OF EVENTS - DISEASES, INJURIES, OR COMPLICATIONS - THAT DIRECTLY CAUSED THE DEATH. DO NOT ENTER TERMINAL EVENTS SUCH AS CARDIAC ARREST, RESPIRATORY ARREST, OR VENTRICULAR FIBRILLATION WITHOUT SHOWING THE ETIOLOGY. DO NOT ABBREVIATE. ENTER ONLY ONE CAUSE ON EACH.

32. IMMEDIATE CAUSE (Final disease or condition resulting in death)
 a. **FOUND IN CELL UNRESPONSIVE**
 Due to (or as a consequence of):
 b.
 Due to (or as a consequence of):
 c.
 Due to (or as a consequence of):
 d.
 Due to (or as a consequence of):

33. PART 2: ENTER OTHER CAUSE GIVEN IN PART 1. **SAME AS ABOVE**

34. WAS AN AUTOPSY PERFORMED? ☒ Yes ☐ No

35. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☐ Yes ☒ No

36. MANNER OF DEATH ☐ Natural ☐ Accident ☐ Suicide ☒ Homicide ☐ Pending Investigation ☐ Could not be determined

37. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ No ☐ Probably ☒ Unknown

38. IF FEMALE:
☐ Not pregnant within past year
☐ Pregnant at time of death
☐ Not pregnant, but pregnant within 42 days of death
☐ Not pregnant, but pregnant 43 days to one year before death
☐ Unknown if pregnant within the past year

39. IF TRANSPORTATION INJURY, SPECIFY:
☐ Driver/Operator
☐ Passenger
☐ Pedestrian
☐ Other (Specify)

40a. DATE OF INJURY (MM/DD/YYYY) **08/04/2011** 40b. TIME OF INJURY **08/04/2011** 40c. INJURY AT WORK? ☐ Yes ☒ No 40d. PLACE OF INJURY (e.g., Decedent's home, construction site, restaurant, wooded area)

40e. LOCATION (Street and Number, City, State, Zip Code) **378 FM 2972, RUSK, TX 75785** 40f. COUNTY OF INJURY **CHEROKEE**

41. DESCRIBE HOW INJURY OCCURRED

42a. REGISTRAR FILE NO. **01-204** 42b. DATE RECEIVED BY LOCAL REGISTRAR **08/15/2011**

43. REGISTRAR - CHEROKEE COUNTY CLERK, ELECTRONICALLY FILED
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 AUG 16 2011
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THE STATE OF TEXAS
 DEPARTMENT OF STATE HEALTH SERVICES

A 2011-03110
Mabeng

Patient Account: 20005972-517
 Med. Rec. No.: (0150)221390N
 Patient Name: WEBB, ROBERT ALLEN
 Age: 50 YRS DOB: [REDACTED] Sex: M Race: C
 Admitting Dr.: OUTSIDE TDCJ
 Attending Dr.: OUTSIDE TDCJ
 Date / Time Admitted: 08/09/11 - 0858
 Copies to:

UTMB
 University of Texas Medical Branch

Galveston, Texas 77555-0543
 (409) 772-1238
 Fax (409) 772-5683

Pathology Report

156 9761
PROVISIONAL AUTOPSY REPORT

Autopsy Office (409)772-2858

Autopsy No.: AU-11-00165

AUTOPSY INFORMATION:

Occupation: INMATE Birthplace: UNKNOWN Residence: TEXAS
 Date/Time of Death: 8/4/2011 05:05 Date/Time of Autopsy: 8/9/2011
 Pathologist/Resident: CAMPBELL/XU Service: TDC CONTRACT
 Restriction: NONE

The on-line version of the final autopsy report is abbreviated. If you would like a copy of the complete final report, or if you have any questions regarding this report, please contact the Autopsy Division Office, (409)772-2858.

PROVISIONAL AUTOPSY DIAGNOSIS

- I. Body as a whole: History of arrhythmia on 8/2/2011
 A. Heart: Hypertrophy, mild (weight, 400 gm)
 B. Coronary artery, LAD: Mild atherosclerosis
 C. Lungs: Congestion (weight, right, 800 gm, left, 680 gm)
 D. Aorta, infra-renal: Mild atherosclerosis
 E. Ribs: No fractures
- II. Other findings:
 A. Pelvic wall, right lateral: Surgical prosthesis (plastic mesh), probably for repair of inguinal hernia

The decedent was a 50-year-old Caucasian male inmate with a past medical history of arrhythmia on 8/2/2011, hepatitis C (positive for HCV antibody by serology), esophageal reflux, adjustment disorder with mixed anxiety and depression, and right cheek epidermal cyst. On 8/4/2011 at 0315, the patient was found by a correctional officer, lying unresponsive on a mattress which was on the cell floor. CPR had been initiated and was continued by EMS and nursing staff. The patient's skin was warm and moist, but vital signs could not be obtained. He was intubated and attempted IV therapy was unsuccessful. AED was applied and the EKG monitor showed asystole. The patient was pronounced dead at 0505 on 8/4/2011. A complete autopsy was performed on 8/9/2011.

At autopsy, the aorta revealed no significant atherosclerosis, and the coronary arteries were patent with only mild atherosclerosis of the left anterior descending artery. The heart was slightly heavy. The lungs were congested. There was no pulmonary embolus. Based on the autopsy findings, the cause of death is most likely cardiac arrhythmia. Though toxicologic and neuropathologic examinations are pending, our opinion is that the manner of death is natural, and that this case can be characterized as a sudden cardiac death.

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** The above diagnoses are based on gross findings and are subject to modification after microscopic study. This report should not be used for insurance or medicolegal purposes. Final report will follow **

WEBB, ROBERT ALLEN Page:
 AUTOPSY

Patient Account: 20005972-517
Med. Rec. No.: (0150)221390N
Patient Name: **WEBB, ROBERT ALLEN**
Age: 50 YRS DOB: [REDACTED] Sex: M Race: C
Admitting Dr.: OUTSIDE TDCJ
Attending Dr.: OUTSIDE TDCJ
Date / Time Admitted: 08/09/11 - 0858
Copies: GERALD A. CAMPBELL, M.D., PATHOLOGIST
08/10/11
YX /da

UTMB
University of Texas Medical Branch

Galveston, Texas 77555-0543
(409) 772-1238
Fax (409) 772-5683

Pathology Report

(Electronic Signature)

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Serial: [REDACTED] Name: [REDACTED]

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Print: **WEBB, ROBERT ALLEN**

AUTOPSY

Page:

**** The above diagnoses are based on gross findings and are subject to modification after microscopic study. This report should not be used for insurance or medicolegal purposes. Final report will follow.****

08/17/11 0743

Rec'd
3-28-12

Patient Account: 20005972-517
Med. Rec. No.: (0150)221390N
Patient Name: WEBB, ROBERT ALLEN
Age: 51 YRS DOB: [REDACTED] Sex: M Race: C
Admitting Dr.: OUTSIDE TDCJ
Attending Dr.: OUTSIDE TDCJ
Date / Time Admitted: 08/09/11 0858
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Fax (409) 772-5683
Pathology Report

110 3110
Region A
JDM

1569761

FINAL AUTOPSY REPORT

Autopsy Office (409)772-2858

Autopsy No.: AU-11-00165

AUTOPSY INFORMATION:

Occupation: INMATE Birthplace: UNKNOWN Residence: TEXAS
Date/Time of Death: 8/4/2011 05:05 Date/Time of Autopsy: 8/9/2011
Pathologist/Resident: CAMPBELL/XU Service: TDC CONTRACT
Restriction: NONE

The on-line version of the final autopsy report is abbreviated. If you would like a copy of the complete final report, or if you have any questions regarding this report, please contact the Autopsy Division Office, (409)772-2858.

FINAL AUTOPSY DIAGNOSIS

- I. Body as a whole: History of exposure to high ambient temperature (the unit afternoon temperature, 97.5 deg.F), sudden unexpected death, and status post cardiopulmonary resuscitation.
 - A. Heart: Hypertrophy, mild (weight, 400 gm) C1,2 A3
 - B. Coronary artery, LAD: Myocardial bridging (length, 2 cm; 2.5 cm from origin) A3
 - C. Coronary artery, LAD: Mild atherosclerosis A3
 - D. Blood, post-mortem heart: Toxicologic evidence of citalopram level consistent with toxicity (1100 ng/mL) A3
 - E. Lungs: Congestion (weight, right, 800 gm, left, 680 gm) A3
 - F. Lungs: Focal hemorrhage and edema A3
 - G. Lung, bilateral: Emphysema A3
 - H. Aorta, infra-renal: Mild atherosclerosis A3
 - I. Ribs: No evidence of fractures A5
- II. Other findings:
 - B. Liver: Chronic hepatitis with focal activity A4
 - C. Pelvic wall, right lateral: Surgical prosthesis (plastic mesh), probably for repair of inguinal hernia A5

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***TYPE: Anatomic(A) or Clinical(C) Diagnosis.
IMPORTANCE: 1-immediate cause of death (COD); 2-contributory COD;
3-contributory COD; 4-concomitant, significant; 5-incidental***

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CLINICAL SUMMARY:

The decedent was a 50-year-old Caucasian male inmate with a past medical history of Hepatitis C (positive for HCV antibody by serology), esophageal reflux (caustic lye ingestion at age of 6 years), adjustment disorder with mixed anxiety and depression, and right cheek subcutaneous mass. He smoked 2 ppd for 30 years and quit 5 years ago. He consumed alcohol 6.0 oz per week, 12 can(s) of beer per week, and quit 5 years ago. On 3/1/2010, he had an office visit at UTMB for a right cheek mass (2 cm) slowly growing for 1 year, associated with occasional pain. He reported a 10 lb weight loss for months due to reduced intake from acid reflux. On 3/26/2010, he underwent fine needle aspiration of the cheek mass which showed acellular keratin consistent with an epidermal cyst.

The patient's current medications included: Thorazine (chlorpromazine), Celexa (citalopram), and Omeprazole. 8/2/2011, the patient's EKG showed ventricular tachycardia and two hour cardiopulmonary resuscitation (CPR) was performed. On 8/4/2011 at 0315, the patient was found by a correctional officer lying unresponsive on a mattress which was on the cell floor. CPR was initiated, and the EKG showed ventricular tachycardia. (The date printed on the EKG strip was 8/2/2011. The OIG investigator verified the date/time printed from the device was not correct. It should be 8/4/2011). The patient's skin was warm and moist. No body temperature was taken (The temperature in the unit was 97.5 deg. F at noon on 8/4/2011). The patient's vital signs were unable to be obtained. He was intubated and attempted IV therapy was unsuccessful. AED was applied and EKG monitor showed asystole. He was pronounced dead at 0505 on 8/4/2011. A complete autopsy was performed on 8/9/2011.

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GROSS DESCRIPTION:

EXTERNAL EXAMINATION: The decedent, identified by left toe ID tag as "Webb, Robert Allen", is a well nourished, well developed, white male, measuring 178 cm in length, and weighing approximately 179 lbs according to recent medical records. The general appearance is consistent with the reported age of 50 years. The body is unclad. Rigor mortis is present in the arms and legs and there is fixed lividity on the dorsal surface. The head is normocephalic with gray hair.

The irides are brown with unequal pupils right side measuring 0.4 cm, the left side 0.3 cm in diameter. The corneas are clear, the conjunctivae are slightly congested, and the sclerae are pale with no jaundice. The nares are patent with no exudate. There are no upper teeth and the right lower teeth are absent. Buccal membranes are normal with no lesions. No mass is identified on the face. The trachea is midline. Palpation of the neck reveals no lymphadenopathy or thyromegaly.

Body hair distribution is normal male with sparse hair over the lower legs. The chest diameters are normally proportioned. The abdomen is flat. Lymph nodes in the supraclavicular, axillary and inguinal regions are not palpable.

The back is unremarkable. The arms and legs are unremarkable. The genitalia are normal male for the age.

The following evidence of medical intervention is present: Two EKG leads on the right upper chest.

The following marks and scars are present: There are two abrasions on the middle of left face about 2.5 cm away from the nose. The abrasions measure 0.5 cm and 1.5 cm in diameter. One abrasion is found on the left lower chest, measuring 3.5 x 2.5 cm in size. There are two abrasions identified on the left elbow laterally, measuring 0.5 and 1.5 cm in diameter. There are multiple tattoos on the body: 1. A tattoo is seen on the left upper arm laterally. Another tattoo is found on the left forearm laterally. There are four healed and linear scars on this tattoo measuring 3 cm to 14 cm in length. 2. A tattoo is seen on the right upper chest. 3. There is a big tattoo is seen around the right upper arm. 4. There is a tattoo of two hearts on the right forearm dorsally and two linear well healed scars are found on this tattoo, measuring 7 and 12 cm in length. 5. A tattoo is found on the dorsal surface of right hand. There are multiple linear scars on the left index finger measuring 2 to 3 cm in length.

INTERNAL EXAMINATION: The body is opened using a standard Y shaped incision, to reveal a 3 cm thick panniculus and the thoracic and abdominal organs in the normal anatomic positions. The lungs approach each other in front of the

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heart. The left pleural cavity contains no fluid, and the right 60 ml of bloody fluid.

The pericardial sac contains 10 ml of clear fluid. No ribs are fractured.

The thymus is largely replaced by fat. No thromboemboli are found in the large pulmonary arteries.

The abdominal cavity contains no fluid. There are no peritoneal adhesions.

CARDIOVASCULAR SYSTEM: Heart: The heart weighs 400 gm (normal male 270-360). The pericardium is smooth and glistening. There is moderate amount of epicardial fat. The left and right coronary ostia are identified in there normal locations. The heart is examined by transverse serial slicing of four sections from apex and then opening following the flow of blood. The remaining myocardium is homogeneous red-brown and no scars present. The endocardium is normal. The left ventricular wall is 1.5 cm thick (normal 1.0-1.8 cm) at the junction of the posterior papillary muscle and free wall, and the right ventricle is 0.3 cm thick (normal 0.25-0.3 cm) 2 cm below the pulmonic valve annulus, anteriorly. The valve leaflets and cusps are white, delicate and membranous.

Valve circumferences measured on the fresh heart are: tricuspid valve 12 cm (normal 12-13 cm), pulmonic valve 6 cm (normal 8.5-9.0 cm), mitral valve 11.5 cm (normal 10.5-11.0 cm), and aortic valve 7.7 cm (normal 7.7-8.0 cm). The foramen ovale is closed.

Blood vessels: The coronary circulation is right dominant based on the origin of the posterior descending artery. The apex is supplied by the left anterior descending artery. The coronary arteries reveal mild atherosclerotic plaques with up to 10% occlusion of the LAD located 1 cm from the origin. There is no evidence of hemorrhage or rupture of the plaques. There is myocardial bridging measuring 2 cm in length, 2.5 cm from the origin. The infrarenal aortic segment exhibits 10% surface area involved with plaques. The aorta exhibits less than 5% surface area involved with plaques. The celiac, superior and inferior mesenteric, renal and iliac arteries are unremarkable with minimal atherosclerosis. The bilateral, iliac arteries exhibit about 10% surface area with plaques. The superior and inferior vena cavae and their branches are normal. The portal vein is normal.

RESPIRATORY SYSTEM: Larynx and trachea: The laryngeal mucosa is pink-red, and the vocal cords are normal with no lesions. The tracheal mucosa is normal.

Lungs: Palmar edema is visible as frothy fluid admixed in the bronchi. The right lung weighs 800 gm (normal male 435), and the left 680 gm (normal male

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385). The pleural surfaces with moderate amount of carbon deposition. The evidence of emphysema is seen on both of the lungs. Lividity is present on the dorsal surface. The right lung is inflated with formalin before sectioning. The bronchial and vascular trees are normal. The hilar nodes are normal. The lung parenchyma is dark red with no obvious consolidation.

GASTROINTESTINAL TRACT: Esophagus: The esophageal mucosa is gray-red and no obvious erosions or strictures are identified. No esophageal varices are identified.

Tongue: The tongue has a finely granular surface with no coating.

Stomach and duodenum: The stomach contains about 30 ml of gray-green fluid. The mucosa is normal.

The duodenal mucosa is normal.

Pancreas: The pancreas has a normal conformation. It is gray-green, normally lobulated and firm in consistency. The pancreatic duct is patent.

Biliary tract: The gallbladder serosa is gray-green and glistening. The gallbladder contains about 30 ml of green bile and no stones are identified. The mucosa is gray and lividity. The wall measures up to 1 mm thick, and is unremarkable. The cystic duct, hepatic duct, and common duct are normal, and bile is expressed freely from the ampulla on compressing the gallbladder.

Liver: The liver weighs 1150 gm (normal male 1400-1900). The liver surface is smooth and homogeneous. Glisson's capsule is transparent and glistening. The liver is serially sliced to reveal a homogeneous lobular pattern. The cut surface is gray-pink without focal abnormality.

Small Bowel: The serosa is smooth and transparent with no adhesions. The bowel is normal throughout. The lumen contains gray-tan fluid. The mucosa is normal.

Large bowel: The serosa is smooth, transparent with no adhesions. The lumen contains well formed stool. The mucosa is normal.

The appendix is grossly normal.

Rectum and anus: The rectum and anus are normal.

Reticulo-Endothelial System: Spleen: The spleen weighs 290 gm (normal 125-195 gm). It is normal in shape, size, density and color. The cut surface is soft and red-purple.

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GROSS DESCRIPTION:

Lymph nodes: Lymph nodes in the mediastinum, abdomen and retroperitoneum are unremarkable.

Spine: The spine is normal.

Bone marrow: The thoracic and lumbar spine marrow is grossly normal. The trabeculae and cortical bone are normal density.

GENITO-URINARY SYSTEM: Kidneys: The kidneys are symmetric. The right kidney weighs 130 gm and the left 140 gm (normal male 125-170 gm). The capsules strip with ease to reveal tan-pink cortical surfaces. The cut surface reveals demarcated cortico-medullary junctions. The pelves and calyces are normal. The renal pelvic mucosa is normal.

Ureters: The ureters are normal throughout their length, measuring 0.4 cm in maximal external diameter. They are probe-patent into the bladder.

Bladder: The bladder is dilated with no hemorrhage. The trigone is normal.

Prostate: The prostate is normal in size, color, consistency, and texture. Serial slicing reveals normal granular surfaces without distinct architecture. The seminal vesicles are normal.

Testes: The right testis weighs 26.1 gm, and the left 22.7 gm (normal 20-25 gm). The tunicae albugineae are tan-white, smooth and glistening. The cut surfaces are soft and tan-yellow, with no lesions.

ENDOCRINE SYSTEM: Thyroid: The thyroid weighs 15.6 gm (normal 10-22 gm), and is red-brown, bosselated and glistening. The cut surface is homogeneous, translucent, red-brown. No lesions are identified.

Parathyroids: Several golden-brown, soft fragments of tissue are collected as possible parathyroids.

Adrenal glands: The right adrenal gland weighs 7.1 gm and the left 8.5 gm (normal 5-6 gm). The adrenal glands have a normal conformation and position. Serial slicing in the transverse plane reveals 1 mm thick firm golden yellow cortices, with gray soft medullae with no lesions.

BRAIN AND SPINAL CORD: The scalp, calvarium, base of the skull and dura mater are normal. The brain weighs 1340 gm (normal male 1200-1400). The gyri and sulci display a normal pattern without edema or atrophy. The leptomeninges are unremarkable. The circle of Willis, basilar and vertebral arteries show no atherosclerosis. No indentation/herniation of the cingulate gyri, unci or

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GROSS DESCRIPTION:

molding of the cerebellar tonsils are noted. The brain is fixed in formalin for later examination by a neuropathologist (see neuropathology report).

SPINAL CORD: The grossly normal spinal cord is fixed in formalin for later examination by a neuropathologist.

PITUITARY GLAND: The grossly normal pituitary gland is fixed in formalin for subsequent examination by a neuropathologist.

Blood was submitted for toxicology tests and a vitreous sample was submitted for electrolyte analysis and osmolarity test (results from the latter not yet available - will be reported as an addendum). Samples of liver, kidney, heart, lung, and spleen, were frozen for potential further examination.

Toxicology Results:

Blood drawn postmortem from heart was submitted for toxicologic analysis to Aegis Sciences Corporation, Nashville, TN, for the following tests:

41150 - Chlorpheniramine; 41168 - Citalopram (Celexa)

Results are as follows:

Drug Class	Result	Quantitation	Reporting Threshold
Chlorpheniramine	NONE DETECTED		1 ng/mL
Citalopram	POSITIVE	1100 ng/mL	1 ng/mL

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MICROSCOPIC DESCRIPTION:

Heart, right and left ventricle, Slides 15-19, (5 H&E):
 In the posterior wall of left ventricle, there is focal subendocardial mild patchy interstitial fibrosis. A few wavy fibers are in the septum. There are no fibrosis scars or thrombi in the left and right ventricle.

Lung, left, Slides 10 and 11 (2 H&E):
 The architecture is preserved and there is focal pleural fibrosis. The parenchyma demonstrates diffuse congestion and focal hemorrhage. There is edema in the left lower lobe. No thrombus is noted.

Lung, right, Slides 12-14 (3 H&E):
 The architecture is preserved and demonstrates congestion. There is focal hemorrhage. Mild emphysema is noted in right upper and middle lobe. No thrombus is noted.

Kidney, bilateral, Slides 5 and 6, (2 H&E):
 There is autolysis of the tissue which prevents detecting early acute tubular necrosis. There is multifocal interstitial fibrosis with minimal lymphocytes infiltration. There are a few complete sclerotic glomeruli.

Adrenal gland, Slides 1 and 2, (2 H&E):
 There is severe autolysis but the architecture is preserved.

Liver, Slide 4, (1 H&E):
 There is mild steatosis. Lymphocytes infiltration in the portal triads is suggestive of lymphocytic triaditis. There is focal lobular invasion of lymphocytes. Focal bridging fibrosis is suggestive of early stage of cirrhosis, which indicates chronic hepatitis with focal activity.

Spleen, Slide 21, (1 H&E):
 There is severe congestion. The red pulp is expanded due to congestion and the white pulp is atrophic.

Pancreas, Slide 22, (1 H&E):
 There is severe autolysis but normal architecture without pathologic change.

Thyroid, Slide 3, (1 H&E):
 There is no pathologic change.

Parathyroid, Slide 23, (1 H&E):
 One piece of parathyroid gland is identified and there is no pathologic change.

Testes, Slides 1 and 2, (2 H&E):
 There is active spermatogenesis and it is appropriate for given age.

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Prostate, Slide 9, (1 H&E):
No pathologic change is noted.

Urinary bladder, Slide 9, (1 H&E):
There is autolysis. No pathologic change is noted.

Tongue, Slide 20, (1 H&E):
No pathologic change is noted.

Esophagus, Slide 7, (1 H&E):
There is mucosal autolysis but otherwise no pathologic change.

Stomach, Slide 7, (1 H&E):
There is mucosal autolysis but otherwise no pathologic change.

Gallbladder, Slide 8, (1 H&E):
There is mucosal autolysis with no pathologic change.

Ileum, Slide 8, (1 H&E):
There is mucosal autolysis and submucosal lymphoid hyperplasia.

Sigmoid colon, Slide 8 (1 H&E):
There is mucosal autolysis with no pathologic change.

Bone marrow, Slide 25, (1 H&E):
Cellularity is 70%. Myeloid, erythroid, and thrombocytic lineages are identified. The trabecular bone is normal.

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CLINICOPATHOLOGIC CORRELATION:

The decedent was a 50-year-old Caucasian male inmate with a past medical history of Hepatitis C (positive for HCV antibody by serology), esophageal reflux (caustic lye ingestion at age of 6 years), adjustment disorder with mixed anxiety and depression, and right cheek subcutaneous mass. The patient's current medications included: Thorazine (chlorpromazine), Celexa (citalopram), and Omeprazole. On 8/2/2011, the patient's EKG showed ventricular tachycardia and two hour cardiopulmonary resuscitation (CPR) was performed. On 8/4/2011 at 0315, the patient was found unresponsive in his cell, and resuscitation attempts were unsuccessful. A complete autopsy was performed on 8/9/2011.

At autopsy, the major organs showed advanced decomposition grossly and severe autolysis microscopically. The aorta and the coronary arteries exhibited mild atherosclerosis. The left anterior descending branch exhibited myocardial bridging, measuring 2 cm in length, beginning at 2.5 cm from the origin. The heart demonstrated mild left ventricular hypertrophy. Both lungs were congested and had focal hemorrhage and edema. The right lung showed mild emphysema. The liver revealed chronic hepatitis with focal activity.

According to this patient's clinical history and autopsy findings, environmental hyperthermia related heat stroke is a consideration. Heat stroke (HS) is a serious and potentially life-threatening condition defined as a core body temperature greater than 40.6 C. Two forms of HS are recognized, classic heat stroke, usually occurring in very young or elderly persons, and exertional heat stroke, more common in physically active individuals. An elevated body temperature and neurologic dysfunction are necessary but not sufficient to diagnose HS. Associated clinical manifestations such as extreme fatigue; hot dry skin or heavy perspiration; nausea; vomiting; diarrhea; disorientation to person, place, or time; dizziness; uncoordinated movements; and reddened face are frequently observed. Potential complications related to severe HS are acute renal failure, disseminated intravascular coagulation, rhabdomyolysis, acute respiratory distress syndrome, acid-base disorders, and electrolyte disturbances. Long-term neurologic sequelae (varying degrees of irreversible brain injury) occur in approximately 20% of patients. The prognosis is optimal when HS is diagnosed early and management with cooling measures and fluid resuscitation and electrolyte replacement begins promptly. The prognosis is poorest when treatment is delayed more than 2 hours.

A heat wave is defined as three or more consecutive days with air temperatures greater than 32.2 C. Exposure to excessive heat may cause illness, as heat directly induces tissue injury with severity dependent upon the critical thermal maximum (ie, the level and duration of core heating). The critical thermal maximum in humans is a body temperature of 41.6 C to 42 C for between 45 minutes and 8 hours. At extreme body temperatures (eg, 49 -50 C), all cellular structures are destroyed and cellular necrosis occurs in less than 5 minutes.

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 Fax (409) 772-5683
 Pathology Report

FINAL AUTOPSY REPORT

Autopsy Office (409)772-2858

Autopsy No.: AU-11-00165

CLINICOPATHOLOGIC CORRELATION:

The precise incidence of HS is unknown for many reasons. First, in the United States, heat-related death is not a reportable condition in any state. Second, the definition of HS varies, resulting in under reporting of HS cases. Third, many heat-related illnesses and deaths are unrecognized as such and are not reported. Therefore, the reported incidence of HS in the United States varies from 17.6 to 26.5/100,000. Why some cases progress to HS and others do not is unclear, but it appears that genetic polymorphisms may determine susceptibility; the likely candidate genes include those that encode cytokines, coagulation proteins, and heat shock proteins. Mortality rates for HS range from 10% to 70%, depending on the severity and age of the patient. The greatest numbers of deaths occur when treatment is delayed for more than 2 hours.

This patient had several risk factors of HS: lack of air conditioning, chronic illness, and use of Thorazine (chlorpromazine). Studies have showed Thorazine may impair thermoregulation. The cardiovascular system is frequently compromised in HS. The patient had ventricular tachycardia before his death. Confirmation of dehydration was attempted via vitreous humor electrolyte analysis, but prolonged postmortem intervals and putrefaction complicated the assessment.

Another issue that must be addressed in this case is the abnormally high level of citalopram (Celexa) in the post mortem blood obtained from the heart (1100 ng/mL, see toxicology report). This level is in the range reported to be in the toxic and/or lethal in several studies. [3-5] Potential reasons for a toxic level of this drug include overdose, changes in metabolism due to disease, and hemoconcentration due to dehydration. Clinical manifestations of citalopram toxicity include prolonged QT interval in the cardiac cycle and torsades de pointes (TdP), which is a potentially fatal type of ventricular arrhythmia. [6] The possibility of post-mortem redistribution of drugs, especially into heart blood must also be considered, however. This effect could artifactually considerably elevate the measured level over the actual level of the drug in circulating blood prior to death. A study of this effect reported only one case with measured citalopram levels, and in that case the ratio of the drug levels between blood drawn from femoral vein and heart was nearly unity (i.e. minimal redistribution effect). [7] Femoral blood could not be obtained in this case.

Based on the history of exposure to high ambient temperature and advanced organ autolysis, environmental-induced hyperthermia is likely a major factor contributing to death in this case. However, the measured toxic level of citalopram cannot be ruled out as a significant (and possibly major) factor. In either case, the manner of death must be considered accidental, as no evidence of suicidal intent has been presented.

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Date sent: 4/19/13

Patient Name: WEBB, ROBERT ALLEN

Sent by: CE

Patient Location: AUTOPSY

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Continued....

Page: 11

Patient Account: 20005972-517
Med. Rec. No.: (0150)221390N
Patient Name: WEBB, ROBERT ALLEN
Age: 51 YRS DOB: [REDACTED] Sex: M Race: C
Admitting Dr.: OUTSIDE TDCJ
Attending Dr.: OUTSIDE TDCJ
Date / Time Admitted: 08/09/11 0858
Copies to:

UTMB
University of Texas Medical Branch
Galveston, Texas 77555-0543
(409) 772-1238
Fax (409) 772-5683
Pathology Report

FINAL AUTOPSY REPORT

Autopsy Office (409)772-2858

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CLINICOPATHOLOGIC CORRELATION:

References:

1. Yeo, T. Heat Stroke, A Comprehensive Review, AACN Clinical Issues, 2004; 15 (2): 280-293
2. Prevention and treatment of heat injury. Med Lett Drugs Ther. 2003; 45:58-60.
3. Jonasson, B., Saldeen, T. Citalopram in fatal poisoning cases. Forensic Sci Int. 2002; 126:1-6.
4. Segura, L.J., Bravo, B. Postmortem citalopram concentrations: alone or along with other compounds. J Forensic Sci. 2004; 49:814-819.
5. Winek, C.L., et al. Drug and chemical blood-level data 2001. Forensic Sci Int. 2001; 122:107-123.
6. Chan, A., et al. Drug-induced QT prolongation and torsades de pointes: evaluation of a QT nomogram. QJ Med. 2007; 100:609-615.
7. Rodda, K.E., Drummer, O.H. The redistribution of selected psychiatric drugs in post-mortem cases. Forensic Sci Int. 2006; 164:235-239.

YX /da
09/02/11

GERALD A. CAMPBELL, M.D., PATHOLOGIST

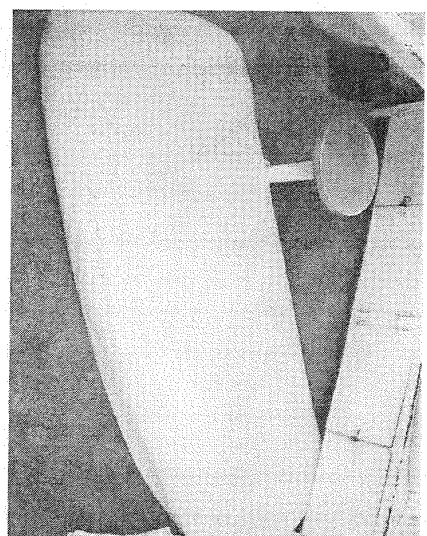
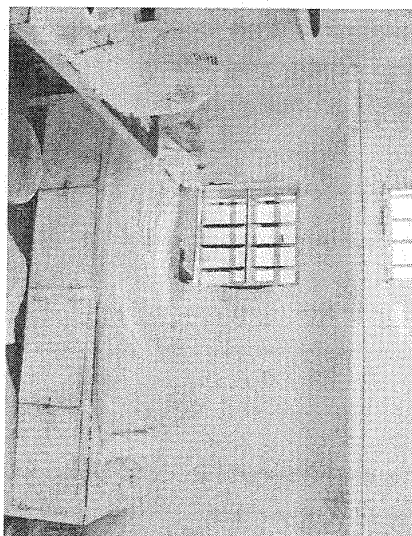
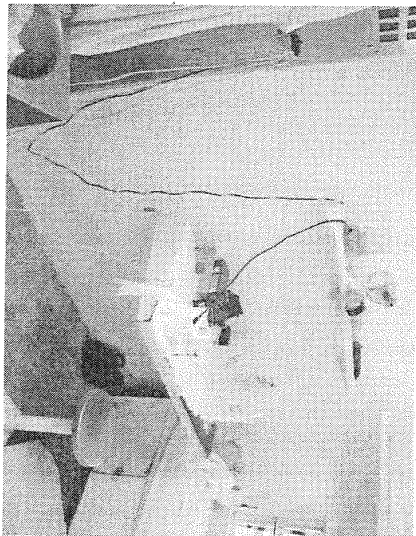
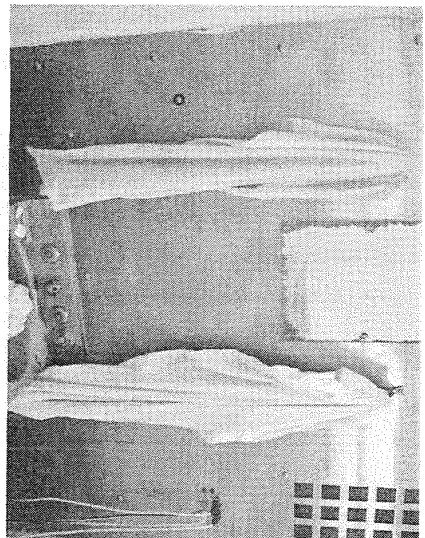
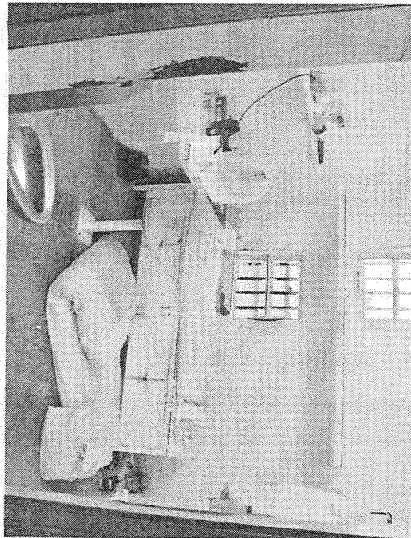
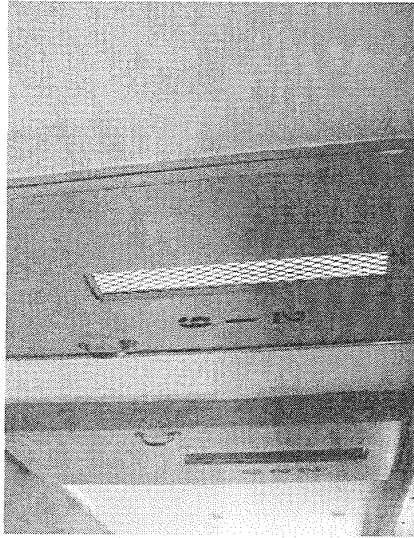
(Electronic Signature)

02/17/12

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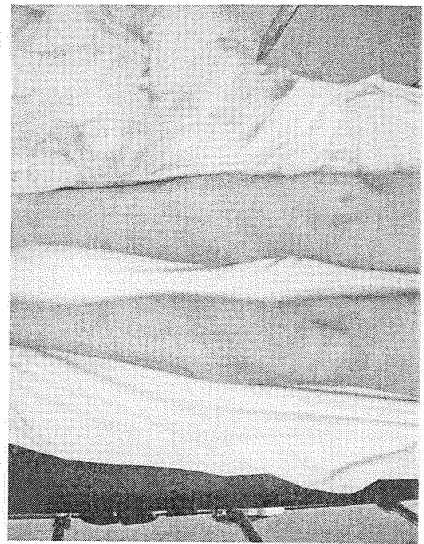
END OF REPORT

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8.1



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 ** REQUESTOR: JH17509 - HILL, JERRY SKYVIEW/HODGE COMPLEX **

*** B Y B W D U T B M S K E T P R I N T ***

MESSAGE ID: 9660912 DATE: 08/04/11 TIME: 09:03pm PRIORITY: 000

SUBJECT: TEMP CHECKS

4D 2ND BRIEF CONDUCTED DAYROOM TEMPERATURE CHECKS AND NOTED THE FOLLOWING READINGS:

START TIME: 1830

START TIME: 1845

	TEMP		TEMP
A WING	98.6	A WING	98.6
B WING	97.7	B WING	94.2
C WING	97.5	C WING	94.2
D WING	98.2	D WING	95.1
E WING	97.7	E WING	95.8
F WING	97.1	F WING	95.8
G WING	97.5	G WING	95.7
H WING	96.9	H WING	95.7
I WING	96.8	I WING	95.7
J WING	97.7	J WING	95.7
K WING	96.9	K WING	95.8
L WING	97.1	L WING	96.8

THE READINGS WERE TAKEN BY SGT. J. JOHNSON

REPORT BY: J. JOHNSON
 SGT 2ND

SENT CO: WACT SHEET

(115)

(16)

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**Correctional Managed Care
INPATIENT NURSING PROGRESS NOTE**

Patient Name: WEBB, ROBERT A **TDCJ#:** 1569761 **Date:** 08/04/2011 04:37 **Facility:** HODGE (HD)

Admission Date: 7/7/2011 08:55AM

Age: 50 year **Race:** W **Sex:** male

Most recent vitals from 6/11/2011: BP: 116 / 69 (Sitting) ; Wt: 179 Lbs.; Height: 71 In.; Pulse: 97 (Sitting) ; Resp: 18 / min; Temp: 96.5 (Oral)

Allergies: NO KNOWN ALLERGIES

Patient Language:	Name of interpreter, if required:
--------------------------	--

Current Medications:

THORAZINE 200MG, 1 TABS ORAL EVENINGS

CELEXA 40MG, 1 TABS ORAL QPM

PRILOSEC 20MG, 1 CAPS ORAL BID

At 0330 medical staff was called to J-1,C219 for pt being unresponsive. Medical met TDCJ staff with gurney and pt on it. CPR had been initiated by TDCJ staff. CPR was ongoing until arrival at EMS ambulance. EMS staff took over on arrival. CPR was continued by EMS and nursing staff. Skin was warm and moist, non responsive unable to obtain vital signs due to ongoing CPR. Pulse was absent, as well as respirations. Pt was intubated, attempted IV therapy unsuccessful and AED was applied to pt and EKG Monitor showed asystole. Death was pronounced by EMS staff at 0355. B Sadler RN CM, Christina Moore Practice Manager and Dr. G. Wright provider on call were notified.

Electronically Signed by ADAMS, CHARLOTTE S. R.N. on 08/04/2011.
##And No Others##

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**Correctional Managed Care
INPATIENT NURSING PROGRESS NOTE**

Patient Name: WEBB, ROBERT A **TDCJ#:** 1569761 **Date:** 08/04/2011 04:37 **Facility:** HODGE (HD)
Admission Date: 7/7/2011 08:55AM

Age: 50 year **Race:** W **Sex:** male

Most recent vitals from 6/11/2011: BP: 116 / 69 (Sitting) ; Wt: 179 Lbs.; Height: 71 In.; Pulse: 97 (Sitting) ; Resp: 18 / min; Temp: 96.5 (Oral)

Allergies: NO KNOWN ALLERGIES

Patient Language:	Name of interpreter, if required:
--------------------------	--

Current Medications:

THORAZINE 200MG, 1 TABS ORAL EVENINGS

CELEXA 40MG, 1 TABS ORAL QPM

PRILOSEC 20MG, 1 CAPS ORAL BID

At 0330 medical staff was called to J-1,C219 for pt being unresponsive. Medical met TDCJ staff with gurney and pt on it. CPR had been initiated by TDCJ staff. CPR was ongoing until arrival at EMS ambulance. EMS staff took over on arrival. CPR was continued by EMS and nursing staff. Skin was warm and moist, non responsive unable to obtain vital signs due to ongoing CPR. Pulse was absent, as well as respirations. Pt was intubated, attempted IV therapy unsuccessful and AED was applied to pt and EKG Monitor showed asystole. Death was pronounced by EMS staff at 0355. B Sadler RN CM, Christina Moore Practice Manager and Dr. G. Wright provider on call were notified.

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##And No Others##

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Report #: PHO510
Schema: TDCJ

Medication Print Pass

Date/Time: 08/04/2011 05:20 AM

HODGE (HD)

ALLERGIES: NO KNOWN ALLERGIES

PATIENT: WEBB, ROBERT A	MRN: 1569761	DOB: [REDACTED]	HOUSING: C2 CELL 19
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CHLORPROMAZINE 200MG TABLET	RX_ID: 12337978
1 TABS ORAL EVERY EVENING for 30 Days	REFILLS: 1/11
RX DATE: 06/26/11 01:57:50 PM	RUN START DATE: 08/01/11 12:01:00 AM
ORDERING FACILITY: HODGE (HD)	RUN END DATE: 08/31/11 12:01:00 AM
ORDERING PROVIDER: LOCKE, MATTIE L NP	EXPIRATION DATE: 06/26/12 12:01:00 AM
MEDICATION STATUS: ACTIVE	ENTRY USER: ROCKMORE, KATHARYN L L.V.N.

CITALOPRAM 40MG TABLET	RX_ID: 11632027
1 TABS ORAL EVERY EVENING for 30 Days	REFILLS: 5/11
RX DATE: 02/11/11 08:46:35 PM	RUN START DATE: 07/11/11 08:46:00 PM
ORDERING FACILITY: HODGE (HD)	RUN END DATE: 08/10/11 08:46:00 PM
ORDERING PROVIDER: OLIVER, JOE H M.D.	EXPIRATION DATE: 02/06/12 08:46:00 PM
MEDICATION STATUS: ACTIVE	ENTRY USER: OLIVER, JOE H M.D.

OMEPRAZOLE 20MG CAPSULE	RX_ID: 11146874
1 CAPS ORAL TWICE DAILY for 30 Days	REFILLS: 8/11
RX DATE: 11/08/10 07:20:54 PM	RUN START DATE: 07/06/11 12:01:00 AM
ORDERING FACILITY: HODGE (HD)	RUN END DATE: 08/05/11 12:01:00 AM
ORDERING PROVIDER: LOFTON, ROBERT PA-C	EXPIRATION DATE: 11/03/11 12:01:00 AM
MEDICATION STATUS: ACTIVE	ENTRY USER: ROCKMORE, KATHARYN L L.V.N.

TOTAL FOR WEBB, ROBERT A	3
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